



A Guide for Relatives of Children in DCF Custody



DCF

Department for Children and Families
Family Services Division

Introduction

If you are reading this guide, you are considering caring for (or already caring for) a family member, or child with whom you share a family-like bond, who has come into the custody of the Vermont Department for Children and Families (DCF). Being involved with DCF can be a trying time for both the child and parents. They need your support. We need you too!

Relatives and close family friends play an important role in the lives of growing children. They often make informal arrangements to care for each other's children during special events such as the birth of a child or during times of crisis such as death or illness. Whenever they can be, families and friends are there for each other.

You might remember times from your own childhood when you spent summer vacation at your aunt and uncle's, stayed with your grandparents while your parents dealt with a crisis, or your grandmother stayed with you during the birth of a sibling.

As an adult, you now have the opportunity to continue this tradition by caring for a niece, nephew, grandchild, cousin, or close family friend—for a short or extended period of time.

This guide will explain Vermont's child welfare system, what will be involved if you decide to care for a relative child in the system, and what support might be available to help you. We hope it will answer your questions, give you some "food for thought", and help you make the best decision for you and your family.

If something is not clear or you have questions not covered in the guide, please ask us. Our phone numbers are listed on the back of this guide.

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AN OVERVIEW OF FOSTER CARE

How Children Come Into DCF Custody

Every year, hundreds of Vermont families struggle with issues that result in children being placed in DCF custody. The parents might lack the skills or resources they need to care for their children appropriately and keep them safe from harm; they might be struggling with substance abuse, physical illness, or mental health issues; or they might be parenting the only way they know how. Other triggers that can lead to child abuse or neglect can include the loss of one's job, the lack of affordable housing, and incarceration.

Some children—but most often teens—come into DCF custody because they've either committed a delinquent act or they are without or beyond their parents' control.

When the courts find it necessary to place children in state custody, DCF may turn to relatives or close family friends to care for them while they can't be at home. We call this *kinship care*.

The Value of Kinship Care

Being in DCF custody and living away from their parents can be a difficult, emotional, and scary experience for children, regardless of their age and what the situation was like at home. They face living with strangers, being away from home, and an uncertain future. They benefit from kinship care because:

- They get to live with people they already know, trust, and feel comfortable with.
- They know what to expect, because they know you.
- They don't feel the stigma of being a "foster child", because they are simply family being cared for by family.
- They feel more connected to their parents, because they are with family.

If they are not placed with kin, children can be placed:

1. In a licensed foster home;
2. In a residential facility (typically used for children who are older, have special needs that can't be met in a family setting, and/or require a higher degree of supervision); or
3. In the Woodside Juvenile Rehabilitation Center, which is Vermont's only locked juvenile detention and treatment facility (primarily used for youth who have been determined to be a risk to themselves and/or their communities).

THE EXPECTATIONS OF KINSHIP CARE

As a *kinship caregiver*, you will be expected to:

- 4 Provide the child with a safe, stable place to live.
- 4 Make sure the child is taken to health care visits as needed.
- 4 Work with the school on the child's behalf.
- 4 Work as part of a team with DCF, other service providers, the parents, and others.
- 4 Attend all required training.
- 4 Participate in the assessment of your family and home (see page 12).
- 4 Provide information to DCF regarding the child's care and adjustment.
- 4 Participate in planning for the child's permanence.
- 4 Ask for help if you need it.
- 4 Discipline the child in a positive way, by encouraging acceptable behavior and without using corporal punishment.

As a *kinship caregiver*, you can expect to:

- 4 Be treated with respect and courtesy by DCF staff and other service providers.
- 4 Discuss the case plan with the child's DCF social worker.
- 4 Speak to the social worker about any concerns regarding the child.
- 4 Receive assistance and support to care for the child.
- 4 Be invited to attend, and have a chance to speak at, all court and agency hearings and reviews.
- 4 Have access to the information DCF has available about the child, including the reason the child needs out-of-home care; the child and parents' understanding of the separation; the child's behaviors and special needs; DCF's expectation of you; and the purpose and likely duration of the child's stay with you. (Note: you will first have to sign a confidentiality agreement as information about children in custody and their parents must be kept confidential. You will also need to talk to other members of your household to make sure they keep this information private.)

THE CHALLENGES OF KINSHIP CARE

Caring for a relative child is similar to caring for any child in foster care; however, there are a few differences. Unlike most foster parents, kinship caregivers:

- Probably have an ongoing relationship with the child, the parents, and other family members;
- Often have little time to prepare for the child's placement;
- May be inside the crisis rather than outside; and
- Are often new to DCF and therefore unfamiliar with the child welfare system.

Because of these differences, kinship caregivers face some challenges that are unique to relatives caring for relatives in foster care.

Challenge #1: Making The Decision To Help

"I really want to help, but I'm not sure that I can take on having this child come to live with me."

Making the decision to have anybody come to live with your family is difficult; your family's routines will change, relationships will change, and some plans may have to be postponed. When that person is a relative child in crisis, things get even more complicated. It would be very surprising if you did not have mixed feelings about taking this step. It's a big one!

If you have mixed feelings, please know that this is normal. The challenges you face are real and the decision you have to make is a difficult one. Ask yourself these questions:

- What effect will caring for this child have on me and other members of my household?
- What will my friends and other family members think?
- What is my current relationship with the parents and child like?
- How will my age and health affect my ability to parent this child?
- For a list of other questions and tools that can help you make this difficult decision, see *Tools To Help You Make A Decision* on page 9 of this guide.

Challenge #2: Working With Your Extended Family And DCF

Kinship caregivers often find themselves in the difficult position of being "between" their families and DCF. That is simply the nature of kinship care.

Once the department intervenes, DCF is often seen as the "enemy". When you become involved as the child's caregiver, the parents and other family members may see you as being on DCF's side. You may be insulted by, or even isolated from, some family members. This is common when a family is in crisis.

At the same time, people outside of your family may perceive you to be on your family's side. They might, for example:

- Question your judgment about the child's needs.
- Wonder whether you are minimizing the severity of what happened to the child because of your relationship to the child's family.
- Worry that you may have the same unhealthy behaviors as the child's parents, since you are family.
- Feel that you are biased towards or against one parent.

At times, it may seem that you constantly have to prove that you have the child's best interests at heart. Below are some tips for managing this delicate balancing act.

Focus on the child's best interests.

This is what it's all about: the child. He/she needs a safe place to live while in DCF custody, where his or her emotional, medical, physical, and educational needs will be met.

Recognize that strong feelings are normal.

It's normal for parents to be angry and confused when they are separated from their child. You can help by understanding that these reactions are normal, even if they are directed at you.

Learn what the law requires DCF to do to keep children safe.

Understanding what our legal responsibilities are will help you to better understand why we do what we do and what we need from you. Your role will be to provide day-to-day care for the child, while ours will be to work with the parents.

Be aware of your own feelings and opinions.

How do you really feel about the child being in DCF custody? Do you believe the abuse happened? Recognize that it will be difficult for you to work with DCF if you have a different opinion about what led to our involvement. It might help to reach out to other kinship caregivers (see page 26 for a list of resources).

Challenge #3: Being Inside The Crisis

It's not uncommon for relatives to be involved in the events that brought the child into custody. Kinship caregivers are part of the family and may feel like they are "inside" the crisis. During the crisis events can occur quickly and you may be asked to make decisions quickly; emotions are high and people have definite opinions; a long chain of events within the child's family has come to a head; and it may seem that DCF is acting on its own.

Challenge #4: Redefining Roles & Boundaries

Longstanding roles and boundaries within your family will change when the child comes to live with you and you take on the role of parent. The following changes may occur:

From friend or equal to authority figure.

Is one of the parents a close friend or relative? Perhaps you grew up together and share a long history. These relationships imply equality; neither person has control or authority over the other's life. Once you become a kinship caregiver, you will have to make decisions normally made by the parents. This will not only complicate your relationship with the parents, but will also be a difficult adjustment for the child to make.

From bystander to responsible decision-maker.

Relatives do not always have close relationships. You might only see the child and parents at family get-togethers or you might not have seen them in years. In this case, you would be going from playing a minor or non-existent role in the child's life to playing a major one. Not everyone will be comfortable with this shift.

From ally to enemy.

You may find yourself quickly changing from ally to enemy. Perhaps you had been helping the parent and child, but finally felt that you had to call DCF. Conflict may also arise between the child's maternal and paternal families.

From non-competitor to competitor.

Even if you don't intend for this to happen, you may find yourself competing with the parents and other family members for the child's affection and for authority.

From grandparent, aunt, or cousin to "parent".

Being a relative is very different from being a parent. Relatives don't normally discipline children or provide essential needs. Often, they do fun things with the child. Respect is assumed. When a relative takes on the role of parent, it can be a hard shift for both the relative and child to make.

Challenge #5: Understanding What You Might Feel

In their book, *Relatives Raising Children* (CWLA Press, Washington DC, 1997), Joseph Crumbley and Robert Little describe the feelings that kinship caregivers, children, and parents experience when a relative becomes the primary caretaker. This section reviews the more difficult emotions depicted by Crumbley and Little. Sometimes, just knowing that others feel the same way you do can be a great relief.

You might experience anger or sadness when:

- The parent fails to be a parent, hurts the child, interferes with your responsibility to care for the child, or assumes or attempts reunification.
- The child remains loyal to the parent, wants to return home, and exhibits challenging behaviors.
- DCF returns the child to his/her parents, does not return the child to the parents, allows or restricts contact with the parents, or does not provide adequate support.

You might be angry with yourself for feeling obligated to care for the child; being involved in the situation; or not feeling able to cope with the situation.

You might experience loss because of:

- *Interrupted life cycles.* Parenting at this point in your life may affect your future, including having the freedom and resources to pursue personal plans.
- *Lack of space and privacy.* Having another person in your house will disrupt the comfortable patterns and flows your family has developed.
- *A change in roles.* You may have enjoyed being the child's grandparent, uncle, or aunt and that role will change once you have to discipline the child and set limits.
- *Split and dual loyalties.* You may find it difficult when the parents' wishes are at odds with the child's wishes and needs.

You might experience guilt and embarrassment because:

- *You feel responsible for the situation.* Was this my fault? What if I had done more?
- *Of your present role.* Did I betray my family by reporting? By cooperating with DCF?
- *Of what others think.* How does this reflect on my community's perception of me?
- *You need help.* Can I ask for services for the child and my family? Why can't we just get by?

Challenge #6: Understanding Your Relative Child

Depending on how well you know the child, you might experience some challenging moments as you settle into your new routines together. Here are some things to keep in mind:

Understand that the child will see you as he or she knows you.

When the child first moves in, you will still be Uncle, Auntie, or Grandma. He or she will respond to you in old ways and may not fully understand your new role as "parent". It can be frustrating when it takes a while for the child to take you seriously. Make sure the child understands your expectations, rules, and how much you care. This is especially important with teens who are naturally inclined to test authority. Try to strike a balance by being both nurturing and firm. Expect the new situation to take some time to become comfortable.

Treat the child as a family member, not a guest.

It's natural for new caregivers to try to "make up" for everything that has happened to a child in their care. It's tempting to buy them extra clothes and toys or to look the other way when they do inappropriate things. Treating them like everyone else can help them to feel like they belong. At the same time, however, be sure to acknowledge the pain and struggle they are going through. It's also a good idea to give the child some responsibility.

Expect the child to be loyal and attached to his or her parents.

Depending on his or her life experiences, the child may be very attached to his or her parents. He or she may even feel the need to reject and/or disobey you to prove it. You can acknowledge his or her love for the parents while being clear that certain events in the past were not okay.

The child will be used to different rules, expectations, and rewards.

It will take the child some time to get used to the way your family does things, especially if the child has experienced little or no structure. Be clear about your expectations. Write them down if necessary. Be patient!

Expect challenging behaviors.

Children who come from abusive or neglectful situations often show their pain by either withdrawing or acting out. Depression is common. If the child withdraws or displays aggressive behaviors, seek guidance from the child's social worker and other professionals in your community.

Expect more difficult times around parental visits and court hearings.

Visiting with parents and seeing them in court can be confusing for children. Emotions are brought to the surface again. While children are usually happy to see their parents, visits can also bring back pain. Many children lose ground after visits and acting out is common. Recognize why the child is feeling this way and help the child to express his or her feelings. The disruption will pass. Try to plan ahead for these times and make sure you have extra support if you need it.

Be particularly aware if the child has been sexually abused.

If the child has been sexually abused, you may need to adjust your family's habits around personal privacy. Before the child moves into your home, ask for advice about how to keep the other children in your home safe. Children who have been sexually abused sometimes act out in inappropriate ways. Seek counseling for the child if this happens. Remember to make it clear that while the behavior is not acceptable, the child is still loved and valued.

Tips To Help You Manage The Changes

- *Find allies and resources from both sides of the child's family.*
- *Know your responsibilities and stick to them.*
- *Seek help from the "system" including the child's social worker, the resource coordinator, and community service providers.*
- *When conflicts arise, look for "win-win" solutions.*
- *Avoid reopening old wounds.*
- *Encourage and model new, healthier ways of relating.*
- *Give it time; be patient.*
- *Set simple goals, work towards them, and celebrate the small successes.*
- *Use the child's case plan for guidance.*

TOOLS TO HELP YOU MAKE A DECISION

If you asked most kinship caregivers if they knew what they were getting into when they took on caring for a young relative, the resounding answer would be "No!" They would tell you that they did not anticipate the personal growth, new perspectives on life, and relationships that came out of it. They also did not anticipate the challenge of working through the child and family's pain, adjusting past relationships with the child and parents, and having to adjust their own dreams and plans for the future.

Although the child's social worker knows that this is not an easy decision for you, he or she will be under pressure to move the child into a safe, lasting home as quickly as possible. As a result, you might be pressured to make a decision quickly. Below are some questions that can help you make the right decision for your family. Discuss your answers with your family, friends, the resource coordinator, and/or the child's social worker.

1. What is best for the child?
2. What are the child's special needs?
3. Do I have the skills and energy to address these needs?
4. Am I ready for a change in my life, routines, and future plans?
5. Do I understand how the child's experiences may affect his or her behaviors?
6. Do I have the physical capacity to care for this child?
7. Are other family members prepared and willing to take on this challenge?
8. Am I prepared to work with the child's parents?
9. Am I willing to participate in long-term planning for the child, which may involve the child returning home, staying with me permanently, or going to live with another family who can provide permanence?
10. Am I willing to work as a team member with DCF staff?
11. Am I willing to become a parent and give up some aspects of my past relationship with the child?
12. Am I willing to manage the child's safe contact with his or her parents?
13. Do I have the space and household items necessary to care for this child?
14. What help and financial resources do I need to properly care for this child?
15. Is that help available?

Below are three exercises that can help you to evaluate your situation.

Exercise #1: Taking Another Look At The Family Tree

This first exercise will help you better understand the relationships among family members. Get a large piece of paper and draw the child's family tree to the best of your ability. Make sure to identify all members of the child's family, not just your side of the family. Try to list everyone. Ask other relatives for information if you need to. Include people who are important to the child and his or her parents even if they are not related. Leave space around each person's name for notes.

Go back over the child's family tree and ask the following questions about each person. Make a short note next to each to summarize the answer.

1. How do I see this person (e.g. responsible, good, trustworthy, overbearing, or dangerous)?
2. How does the child see this person?
3. How do the child's parents see this person?

Put a question mark next to those people you don't know enough about, and try to find out more about them later. If the descriptions of an individual differ significantly, ask yourself why you, the child, or the parents feel differently about this person. What does it tell you?

Hold onto this tree and refer to it when you have questions such as:

- Who could care for the child when I need a break?
- Who could take the child out for an occasional outing?
- Who could help me advocate on behalf of the child with the agency or school?
- Who can help me understand and work with the parents and/or child?
- Will limits need to be set in the relationships between the child and any of these individuals?
- Do any of these relationships pose a risk to the child or to my family?
If so, how can that risk be minimized?

Considering these questions for each person will help you identify potential resources and challenges that you may not have considered.

Exercise #2: Looking Back

This exercise focuses on the emotional impact of caring for a relative child. It will help you see your own strengths and weaknesses. It focuses on your history and relationship with the child and the child's parents.

On a large sheet of paper, draw a timeline for your life. Put it in the center. Start with your birth, and then add significant events in your life such as graduation, marriage, and the birth of a child—as they occurred. Be as detailed as you want. If an event is important to you, write it down. Above your timeline, draw a similar timeline for the child's parents. Include any significant events in their lives that you know of. Remember to line them up in relation to the same period in your life. Include any significant events in your relationship with the parents. Maybe a good family reunion, a big fight that caused a falling out, or a prior time you intervened in a crisis. Below your timeline, add a similar one for the child. Make sure it includes significant events in your relationship with the child.

Hold on to this timeline, look at it occasionally, and try answering these questions:

- Are my current feelings affected by my history with the child and/or parents?
- Is my history with the child's parents affecting how I am feeling about the child?
- What in my own past could be contributing to the way I am feeling about the child and his or her parents?

While you are doing this exercise, don't worry about how others may judge the feelings you are having. Your feelings are normal and understanding them can help you better care for and understand the child.

Exercise #3: Looking Forward

This last exercise will help you consider the impact of the child's placement on your future. On a separate sheet of paper, draw two "future" timelines starting from where you left off in the last exercise. Make the first timeline be what you hoped and thought your future would be before placement. Make the second timeline be what you think your future will be like if the child comes to live with you. Compare these timelines and ask yourself these questions: How different are these timelines? How realistic are they? What are the financial implications of caring for this child? Can I live with the changes? Add your own questions! Think of other scenarios. Share your thoughts with a loved one or friend. Ask them for comments. Repeat this exercise occasionally as your perceptions may change over time.

THE APPROVAL PROCESS

You must have an approved foster care license in order to care for a child in state custody. While the idea of having to be approved to care for your own relative might be difficult for you to accept, it is absolutely necessary, and you will need to complete the following steps before the child can be placed with you.

In emergency situations, however, the child may be placed with you before the licensing process is completed, but you must be licensed within one month.

Step 1. You Complete An Application Package.

You will complete an application package that includes several forms, including one that gives us permission to request a criminal records check on all members of your household age 16 or older.

Step 2. A Licenser Will Visit You At Home.

A licenser from the Residential Licensing Unit will visit your home to make sure that it is safe for the child. He or she will tour your home, including the room where the child will sleep, and review fire and safety regulations with you. You may have to do some things in order to meet all regulations (e.g. install smoke detectors or buy fire extinguishers). Home visits can take anywhere from one to three hours. This is a great time to ask questions, get telephone numbers, voice your concerns, and start developing a working relationship with DCF staff.

Step 3. You Attend Core Training.

You will be required to attend core training, which everyone that cares for a child in state custody is required to attend. It includes 10 three-hour sessions, is offered a couple of times a year, and usually takes place in the evenings. It covers topics such as the impact of providing kinship care on your family, working with the department and other agencies, and the importance of permanency in children's lives. The training will also help you understand the effects abuse and neglect can have on children and prepare you to deal with abuse- and neglect-related behaviors.

Step 4. We Conduct Backgrounds Checks.

We will conduct background checks including, but not limited to: 1) any criminal history for all household members age 16 or older; 2) any substantiations for child abuse/neglect for all household members; 3) any substantiations for the abuse of a vulnerable adult for all household members age 16 or older; 4) any past due child support payments for the applicants; 5) any motor vehicle violations for all household members age 16 or older; and 6) any past or current Restraining / Relief from Abuse Order for all household members age 16 or older.

Step 5. We Assess The Information Gathered.

Using the information gathered throughout the application process, we will assess the following when considering you as a potential caregiver:

- *Personal History.* This includes your history of child rearing, employment, education, criminal behavior, mental health, substance abuse, and family functioning.
- *Relationship with the parents and child.* What kind of relationship do you currently have? How is that likely to change?
- *Motivation.* Why are you interested in becoming the child's caregiver?
- *Ability to meet the child's needs.* Can you meet the basic, immediate, and special needs of the child? What supports will be necessary to make it possible? Are they available?
- *Willingness to follow the case plan and work as a member of the child's team.* Do you understand the requirements of caring for a child in DCF custody? Are you willing to work as part of a team?
- *Physical environment.* Is your home safe? Does it have adequate living space?
- *Potential for permanence for the child with you.* If it becomes clear that the child cannot return home, will you consider becoming the child's permanent caretaker?

Please note that any criminal history will be considered in light of how it might affect your ability to provide safe and appropriate care for the child—in the context of your current situation. We will consider the nature of the offense, when the offense occurred, the frequency of the offense, the age of the offender at the time of the offense, and any evidence of rehabilitation.

Federal law, however, does not allow us to approve an application if an applicant has:

1. *A felony conviction for child abuse or neglect, spousal abuse, a crime against a child (including child pornography) or a violent crime including rape, sexual assault, or homicide—at any time in the past; or*
2. *A felony conviction for physical assault, battery, or a drug-related offense—within the past five years.*

DCF CUSTODY, WORKING WITH DCF, and CASE PLANNING

Sometimes the greatest frustration for anyone caring for a child in DCF custody is making sense of the process. Below are just a few of the questions we commonly hear: *Who can remove children from their homes? Who gets to make decisions? When do decisions get made? Why does it take so long? Who are all these people? What do they do?*

DCF Custody

A Family Court may grant "legal custody" of a child or youth to DCF when:

1. The child was abandoned, abused, neglected, or at significant risk of being abused or neglected.
2. The child was charged with committing a delinquent act.
3. The child was without or beyond the parents' control.

This is what is meant when you hear that a child has been "removed from the home". Many people believe that DCF has the power to separate children from their parents. Actually, only law enforcement officers may remove children from their homes. And only judges may grant custody to DCF. However, DCF does make recommendations based on the results of its investigation of the situation.

As a kinship caregiver, you are not the legal custodian of your relative child; DCF is. By placing the child with you, DCF relies on you to provide day-to-day care for the child; however, DCF remains the child's legal custodian. This is why the social worker has the authority to decide where the child will live and must be involved in all major decisions about the child's care (e.g. authorizing surgery, consenting to out-of-state travel, and allowing the child to get a tattoo or body piercing) .

Even when custody and guardianship of a child has been removed from the parents, they still retain "*residual parental rights and responsibilities*". These include:

- The right to reasonable visits with the child.
- The responsibility to contribute financially to the child's support.

The only way this can be changed is if the parents voluntarily relinquish their parental rights or the court terminates them (called *termination of parental rights* or *TPR* for short).

The New Department For Children and Families (DCF)

On July 1, 2004, the new Department for Children and Families was created, including:

- ***Child Development Division***
Formerly the Child Care Services Division of SRS, the Child Development Division works to ensure that safe, accessible and quality services are available for every child in Vermont.
- ***Economic Services Division***
Formerly the Department of Prevention, Assistance, Transition, and Health Access or PATH, Economic Services administers state and federal programs such as Medicaid, Food Stamps, and Reach Up to assist eligible Vermonters in need.
- ***Family Services Division***
Formerly the Social Services Division of SRS, Family Services investigates reports of child abuse and neglect; licenses foster homes, child-placing agencies, commissioner-designated shelter programs, and residential facilities for children/youth; works with juveniles on probation; manages the foster care program; works with parents of children in DCF custody; and helps find permanent families for children who cannot safely return home.
- ***Office of Child Support***
The Office of Child Support helps Vermonters to establish and enforce child support court orders and locate missing parents.
- ***Office of Disability Determination Services***
The Office of Disability Determination Services serves Vermonters who apply for disability benefits under the Social Security, Supplemental Security Income (SSI), and Medicaid programs. Their mission is to provide applicants with accurate decisions as quickly as possible.
- ***Office of Economic Opportunity***
The Office of Economic Opportunity seeks to increase the self-sufficiency of Vermonters through programs such as weatherization services, food and nutrition services, and support for community-based organizations engaged in anti-poverty efforts.

Working With DCF

As a kinship provider, you will primarily work with staff from the Family Services Division. Below are descriptions of some of the Family Services employees you may be involved with.

Social Worker

When a child enters DCF custody, a social worker is assigned to work with the child and family. He or she will be your primary contact for information, support, and updates.

Social workers are responsible for many cases, are often out of the office, and can be hard to reach. Take advantage of voice mail and e-mail to stay in touch. When leaving phone messages specify why you are calling, if a call back is needed, and where and when you can be reached. If you need to speak to someone immediately, ask to speak to the social worker's supervisor.

Resource Coordinator

The resource coordinator recruits and trains foster parents, helps workers identify placement options for children, and coordinates services to foster parents and kinship caregivers. The resource coordinator may be the person who first contacted you and is a great resource.

Social Services Supervisor

This person supervises the social workers. If you are having a problem with the child's social worker and have tried unsuccessfully to work it out, contact the supervisor.

Adoption Social Worker

If you are thinking about adopting your relative child, an adoption social worker can help you understand and go through the process.

District Director

This person oversees the local Family Services district office.

Field Services Director

The Field Services Director supervises all DCF division offices in his or her district.

Case Planning

The process of working with the family and service providers to achieve the goal of a safe and permanent home for the child is called *case planning*. The social worker will work with the parents to create a *case plan* that describes:

- Why the child came into DCF custody.
- The family's goals, challenges, strengths, and support system. If you are part of their support network, your role should be noted here.
- What changes the parents, child, or both need to make.
- What support the child and parents need from DCF or other service providers to help them make the needed changes.
- What the case plan goal is for the child. Possible case plan goals include going home (called *reunification*), placement with a relative, legal guardianship, and adoption; however, the initial case plan goal is usually for the child to be reunited with the parent(s).

In most cases, the social worker will put together a team (called a *treatment team*) to help the parents and child work toward the case plan goal. The team typically includes the child's caregivers, parents, social worker, the child depending on his or her age, and others such as the child's teacher, therapist, and/or Guardian ad Litem.

The team will focus on implementing the plan, monitoring the progress made, and making any needed adjustments. The plan will change as the situation changes. Every six months, the social worker will invite team members to a meeting called a *case plan review* to go over the plan, assess the progress made, set expectations, and share information.

An independent person called a *case reviewer* will facilitate the meeting to make sure it is run properly and everyone gets a chance to be heard. At the end of the review, participants will be asked to sign the case plan indicating their agreement. Occasionally, someone will disagree with the case plan. More often than not, however, disagreements are resolved prior to the review and all team members agree to the plan. If you disagree with the case plan, the appeal process to handle such disagreements will be explained at the review.

If sufficient progress has been made, DCF may recommend that the child return home and the case be closed; however, if it becomes clear that the child cannot return home, the goal may be changed to looking for another permanent home for the child. As the child's kinship caregiver you may be asked to consider providing that home.

COURT HEARINGS

Some of the court hearings you and/or the child may have to attend:

Emergency Detention Order

A child may be taken into emergency custody if the child is in immediate danger, has run away, or has been arrested. These hearings may happen in front of the judge or by phone. The judge decides on a temporary plan until he/she can hear more of the facts. Custody of the child may be returned to the parents or temporarily transferred to another party, most often to DCF.

Detention Hearing

A detention hearing is held within a couple of days to decide who should have temporary care of a child who may need to be in protective custody for his or her own or the community's protection. The judge will ask the parents, DCF, the State's Attorney, and the child for their opinion. The judge will then decide who will have temporary custody of the child until the next hearing. If the child is placed in state custody, DCF will determine where the child will live.

Status Conference

An informal meeting held to keep the judge informed about the case.

Merits Hearing

This is the trial part of the case. The child, parents, teachers, doctors, friends, witnesses, police officers, social workers, and caregivers can present *testimony* (or information) about the case. The judge will make a decision after listening to all the information presented. If the judge finds a child is delinquent or in need of care and supervision, he or she may order the child's social worker to write a disposition report, which includes a plan for providing the child and family with the supports and services they need. The judge may order continued temporary custody unless the case is dismissed. If the case is dismissed, there are no more hearings, any custody orders are ended, and the child is reunited with the parent(s).

Disposition Hearing

This is a hearing to present the disposition report to the judge and to decide on the plan for the child and family. All parties involved, including the parents, the child's caregivers, the child's attorney, the parents' attorney, and the Guardian ad Litem will receive a copy of the report before the hearing. Everyone will get the opportunity to voice his or her opinion. The judge will make a final decision about custody of the child at this time and will either accept or reject the plan outlined in the disposition report.

Permanency Hearing

This is a hearing held in family court to review the case and decide on a permanency (long-term) plan for the child once he or she has been in DCF custody for a year and annually thereafter. DCF will present the judge with details of the case, information on the progress made on the case plan, and our recommendation for permanency for the child (e.g. reunification, adoption, guardianship, or some other plan to ensure permanent connections).

People You May See In Court

The State's Attorney

The State's Attorney is responsible for bringing information about the child's situation to the court. He or she must prove to the court that the information in the petition is accurate. The State's Attorney is not a DCF attorney, although DCF often works closely with him or her.

Guardian ad Litem (GAL)

A Guardian ad Litem, called GAL for short, will be appointed for the child when a *Detention Hearing* is scheduled. He or she is a responsible adult who has been trained to work with children in state custody. The GAL's main role is to support the child during the court process. He/she will meet with the child to discuss the situation, attend all court hearings, and advocate for what is in the child's best interest.

Child's Attorney

Once a Detention Hearing is scheduled, the court will appoint an attorney to represent the child—at the state's expense. His or her main role is to review the family's situation and talk to the judge about the child's safety and legal rights. He or she represents the child's position at court. For younger children, this person will work in concert with the Guardian ad Litem. Older teens work with their lawyers much like adults would.

Parents' Attorney

This attorney represents the parent's interests. In some cases, each parent will have their own attorney. If a parent has limited income, the court will appoint an attorney for them—at the state's expense.

Assistant Attorneys General (AAGs)

You may encounter them if your relative child is involved in a termination of parental rights hearing. These attorneys present DCF's position at these hearings.

RESOURCES AVAILABLE TO YOU

Financial Support

- Licensed kinship caregivers receive the same monthly stipend DCF provides foster parents to help cover the expenses associated with caring for a child in custody (e.g. room and board, clothing, and personal expenses). The amount will depend on your experience and training as well as the age and special needs of the child. You will receive a check in the middle of the month that covers the days the child spent in your care during the previous month.
- You can be reimbursed for expenses related to carrying out the case plan. This could include making approved phone calls; attending training; and transporting the child to family visits, meetings, court, and other activities outlined in the child's case plan.
- An initial clothing voucher of up to \$100 may be issued if the child comes into care without clothing and efforts to recover the child's clothing have been unsuccessful.
- Children in care are eligible for free school lunches. Children under the age of five are also eligible to receive services and food from the Women, Infant, and Children (WIC) program administered by the Health Department.
- If the child damages your home accidentally or on purpose, you may be eligible to be reimbursed the costs of repairing the damage if your insurance does not cover it.
- If the child needs special items or has unusual expenses, there may be funds to help. Some organizations help with things like camp, class trips, or other special events. Ask the child's social worker for more information.

Childcare Support

- The Child Development Division of DCF contracts with local agencies to help parents find childcare providers. Your social worker can give you the name of the referral agency in your community. Children in DCF custody must receive care in state-approved registered homes or licensed facilities.
- Subsidized childcare is available if you work outside the home or it's authorized because of the child's special needs.
- Protective services childcare is provided for some children. The child's social worker can authorize this service if he or she feels that the child's situation calls for it.

Medical Benefits

Children in custody are covered for medical expenses either through their parents' insurance or Vermont Medicaid.

Training

In addition to the core training that you are required to take, you can also take advantage of training opportunities offered by DCF and others throughout the year. You can view a calendar of events at www.projectfamilyvt.org/calendar/ or view the Family Services training calendar at ww.dcf.state.vt.us/fsd/trainings.html.

Crisis Support

If you have an immediate crisis, you can call the Family Services District Office between 7:45 a.m. and 4:30 p.m., Monday through Friday. After hours, on weekends, and on state holidays you can call the Emergency Services Program (ESP) at 1-800-649-5285. ESP workers can talk you through a situation, call out a social worker to handle a crisis, or contact your local police if necessary.

Peer Support

You will get opportunities to meet and network with other caregivers, including respite providers, foster parents, kinship caregivers, and adoptive parents.

You can also become a member of the Vermont Foster/Adoptive Families Association (VFAFA)—a grassroots network of foster and adoptive parents throughout Vermont. Membership benefits include a newsletter, annual conferences, ongoing training & networking opportunities, and peer support.

Other Support

Case Management

DCF works with several agencies that provide additional supports to caregivers including case management. Case managers can come to your home to consult with you around child-specific behaviors and ways to manage them. A case manager might also help you arrange appointments and work with other service providers. Often, the support services can be tailored to the needs of your family and the child. Ask the social worker or resource coordinator what services are available in your area.

Education

The child is eligible to attend school in your school district. It is the social worker's responsibility to enroll the child in school unless you have been granted guardianship. This may be a difficult time for the child, especially if he or she is moving to a new school. Understand that he or she may act out or withdraw. Introduce yourself to the school personnel and develop a working relationship with them. Be prepared to work with the social worker and school staff to help the child make a smooth transition. Ask about the Educational Surrogate Parent Program in your area; this program provides volunteers that help make sure children in custody get their educational needs met.

Respite Care

An authorized respite provider can care for the child for short, planned periods of time, providing both you and the child with breaks. All caregivers are allotted a minimum of two days per quarter (or eight days a year), although some children and families may require more than this. You may use respite a few hours at a time, for a weekend, or up to a week or two.

Respite providers may come to your home or the child may go to theirs. Often, respite providers are people known by you or the child and they have been approved by the agency. Respite providers may also be other licensed caregivers. Sometimes caregivers trade respite care.

Other

Other services may also be available depending on the child's special needs, including intensive family-based services, sexual abuse victim and offender treatment services, and parent educators from local family service agencies.

THE ULTIMATE GOAL: PERMANENCE

DCF custody is meant to be temporary. The ultimate goal is to provide the child with a safe, permanent home—ideally with his or her parents. When this cannot happen, DCF must pursue other options to achieve permanence for the child.

As a kinship caregiver, you may be asked to consider becoming a permanent placement for the child should he or she not be able to return home. This may occur early on, which may surprise or even offend you. Relatives are often committed to keeping the child *"in the family"* and can be surprised when they find out that other options, such as adoption, are being considered.

This does not mean, however, that DCF has given up on the parents. It simply means that while we work towards the child's return home, we must also make alternative plans in case that doesn't happen. This way, we can achieve a timely outcome that respects the child's need for stability. Living in uncertainty and moving between different living situations can be extremely disruptive to a child's development.

A federal law passed in 1997, the Adoption and Safe Families Act (ASFA), requires DCF to consider other options for a child if he or she can't safely return home within 15 months — unless there is a compelling (or convincing) reason to extend this time period.

Permanency implies not only an emotional and verbal commitment to the child, but also a legal resolution. When a child cannot return home, DCF may pursue the following options with you. Carefully consider what the child wants and his/her best interests when choosing between these options. Remember to work closely with the child's social worker, so DCF can recommend to the court which path to take.

Long-Term Kinship Care

In long-term kinship care, the child remains in your care; however, DCF custody continues, DCF remains involved with your family, and regular court hearings and agency reviews continue. This may be a good option for older teenagers in custody who do not wish to be adopted, but is rarely appropriate for younger children.

State custody is no place for a child to grow up.

Permanent Guardianship

"Permanent Guardianship" is a legally created relationship between a child and caretaker that is intended to continue until the child reaches the age of majority. In a permanent guardianship, DCF is no longer involved; the guardian is responsible for the child's day-to-day care, protection, and education; and the parents retain residual parental rights and responsibilities, including the right to reasonable visits and the obligation to provide financial support. After the court has issued a final order establishing permanent guardianship, the parents no longer have the right to seek termination of the guardianship order; they may only seek enforcement or modification of an order of visitation, contact, or information. Permanent guardianship typically occurs when all parties agree that this is the best option for the child.

As a relative, you may be inclined to pursue guardianship rather than adoption; however, you should be aware that once guardianship is transferred from DCF to you, the child would no longer be eligible for federal adoption assistance should you later decide to adopt—unless the child is eligible for Supplemental Security Income (SSI).

Adoption

If you adopt your relative child, you become his or her legal parent with all the rights and responsibilities that entails.

Before adoption can take place, however, the parents must "*voluntarily relinquish*" their rights or the courts must "*terminate their parental rights*". The latter can be a highly contested process and can be especially difficult for an adopting kinship caregiver.

Voluntary relinquishment is preferable because it is less contentious and leaves room for an "open adoption". This is when the adoptive parents agree that the birthparents can still have a relationship with the child. Open adoption is often a good option for relative adoptions. It can work if the adopting relatives have a good relationship with the parents and remain focused on the child's best interests. It is especially beneficial if the child has a good relationship with a parent, wants to continue it, and/or has siblings still living with that parent that he or she wants to keep in touch with. Open adoptions are not appropriate, however, if ongoing contact could expose the child to further risk of harm.

An adoption subsidy may be available to help you meet the child's ongoing special needs; if you are considering this option, consult an adoption social worker to see if this assistance might be available to you.

SOME FINAL WORDS

We hope this guide has helped you learn more about DCF and how you can help a relative child who is in the department's custody. Whatever you decide, we thank you for taking the time to learn more about kinship care. If you have further questions, please contact the child's social worker or the local resource coordinator.

Some final words of advice:

- Don't make a decision until you are ready.
- Break decisions into bite-sized chunks (e.g. "I can respond to this emergency by providing a home for a week. By the end of the week, I will decide if I can do it longer.")
- Discuss your situation with a friend whose advice you trust.
- Make sure you have good information about the child, his or her situation, and the agency's expectations.
- Talk with the child's social worker, service providers, or previous foster parents before you make your decision.

A Home Isn't All A Child Needs...

If you feel you can't have your relative child come to live with you, there are many other ways you can offer support.

Please consider helping in one or more of the following ways:

- *Provide emotional support to the child and/or parents.*
- *Provide respite care (or time-off) for whoever becomes the child's caretakers.*
- *Transport the child and/or parents to meetings, medical appointments, school functions, and recreational activities.*
- *Be a mentor for the child and/or role model for the parents.*
- *Advocate on behalf of the child and/or parent(s).*
- *Be the child's educational surrogate.*
- *Provide emergency/crisis support in times of great need.*

RESOURCES FOR KINSHIP CAREGIVERS

Vermont Support Groups

Grandparents As Parents (GAP) - Milton

<http://www.miltonfamilycenter.org/grandparents.php>

For more information call Charlotte Parot at 893-1457.

Grandparents Together - St. Johnsbury

For more info, call Mary at 802-748-7845 or Chris at 802-892-6176.

Grandparents Raising Their Children's Children - Montpelier, Waterbury, Williamstown

For more info, call Evelyn Sawyer at 802-433-1513.

GRASP: Grandparents & Relatives As Surrogate Parents - Rutland

For more info, call Janine Small at 802-773-3352.

Websites

AARP: Help For Grandparents Raising Grandchildren

http://www.aarp.org/families/grandparents/raising_grandchild/

Children's Defense Fund

<http://www.childrensdefense.org/childwelfare/kinshipcare/>

Generations United: National Center on Grandparents and Other Relatives Raising Children

<http://www.gu.org/projg&o.asp>

Grandparents Raising Grandchildren

http://www.raisingyourgrandchildren.com/grandparent_and_kinship_caregivers.htm

GrandsPlace: For Grandparents and Special Others Raising Children

<http://grandsplace.com/>

Kinship Caregivers and the Child Welfare System: A Factsheet for Families

http://naic.acf.hhs.gov/pubs/f_kinshi/index.cfm

The Grandparent Foundation

<http://www.grandparenting.org/>

Through the Eyes of a Child - Grandparents Raising Grandchildren

<http://www.uwex.edu/relationships/>

ESSENTIAL PHONE NUMBERS

	Name	Phone
Social Worker:	_____	_____
Supervisor:	_____	_____
Resource Coordinator:	_____	_____
Parent/Guardian:	_____	_____
Parent/Guardian:	_____	_____
School Contact:	_____	_____
Childcare Provider:	_____	_____
Therapist:	_____	_____
Primary Care Physician:	_____	_____
Dentist:	_____	_____
Educational Surrogate:	_____	_____
Attorney:	_____	_____
Guardian ad Litem:	_____	_____

Emergency Numbers

DCF Emergency Services Program (for after office hours): 1-800-649-5285

Local Police:	_____	_____
Local Crisis Program:	_____	_____
Other:	_____	_____

Family Services Division

If you require an accommodation because of a disability, please let us know.

Main Office

103 So. Main Street, Waterbury, VT 05671-2401
Phone: 802-241-2131 • Fax: 802-241-2407

District Offices

BARRE - 479-4260

255 North Main St., Suite 7, Barre, VT 05641-4189

BENNINGTON - 442-8138

200 Veterans Memorial Dr., Suite 14, Bennington, VT 05201-1956

BRATTLEBORO - 257-2888

232 Main Street, 2nd Floor, Brattleboro, VT 05301-2879

BURLINGTON - 863-7370

1193 North Ave, Burlington, VT 05401-2749

HARTFORD - 295-8840

226 Holiday Dr., Ste. 32, White River Jct., VT 05001-2024

MIDDLEBURY - 388-4660

700 Exchange St., Ste. 105, Middlebury, VT 05753-1529

MORRISVILLE - 888-4576

63 Professional Dr., Suite 3, Morrisville, VT 05661-8522

NEWPORT - 334-6723

100 Main Street, Suite 230, Newport, VT 05855-4898

RUTLAND - 786-5817

220 Asa Bloomer Bldg, 88 Merchants Row, Rutland, VT 05701-3449

ST. ALBANS - 527-7741

20 Houghton St., Ste. 211, St. Albans, VT 05478-2247

ST. JOHNSBURY - 748-8374

67 Eastern Ave., Ste. 4, St. Johnsbury, VT 05819-5603

SPRINGFIELD - 885-8900

100 Mineral St., Ste. 101, Springfield, VT 05156-3166

<http://www.dcf.state.vt.us/fsd/>